

**FEDERAL AVIATION ADMINISTRATION
AEROSPACE MEDICAL CERTIFICATION DIVISION
PATHOLOGY CODING PROJECT**

MARKET RESEARCH QUESTIONNAIRE

1. Submit a letter of interest and identify your capabilities. This document should identify:
Type of services provided by your firm, Size and type of services provided by previous contracts (elaborate and provide detailed information and past performance), number of years in business.
2. Describe the services provided for contracts identified as same/similar services. Include the pricing arrangement, performance period, and quantify the amount of work/services provided.
3. Identify the geographical areas where your company provides services.
4. Describe your expected programmatic approach (in-house, teaming, subcontracting, etc.). Respondents must provide their strategy for accomplishing this work, including the percentage of work that will be done by eligible small, service-disabled veteran-owned and 8(a) certified businesses.
5. Describe your Quality Assurance/Quality Control process for the management of document review, and the corporate policy for measuring performance.
6. Describe your experience in utilizing document imaging work flow systems.
7. Describe your experience in providing ICD-9 to ICD-10, ICD-10 to ICD-11 translation services of medical data.
8. Describe your experience in data conversions from proprietary pathology codes to ICD codes of medical data.
9. What ICD code would you recommend to converting current proprietary pathology codes to?
10. What ICD code would you recommend in order to have the capability to interface with the U.S. Department of Health and Human Services (HHS) Nationwide Health Information Network (NHIN) ICD Standard and the National Health Architecture (NHA)?
11. What experience do you have in translation between any of the ICD coding systems?
Currently we would only be interested in translation between ICD-9, ICD-10, and ICD-11.
12. Please explain how you would implement:
 - Educating agency personnel
 - Modifying systems documentation
 - Addressing new coding procedures and workflow
 - Making wide-spread "Y2K" like modifications to IT systems and data to handle the increases in the length of the codes

AMCD Pathology Code Conversion Services Market Survey
Attachment 2

- ICD-10-CM codes are increasing from a minimum-maximum of three to five to five to seven
- ICD-10-PCS codes have increased from a min-max of three to four to a required minimum of seven characters.
- Field length increases and changes to handle alphanumeric data are likely to be necessary throughout all internal and external file interfaces, in application systems processing, and in any file and database where ICD codes are carried and retained
- Storage of both ICD-9 and ICD10 codes with increased volumes from 17,000 approximately 155,000 ICD-10 codes
- Increased file and database storage especially for hospitals reporting ICD-10-PCS and payers and clearinghouses in general. This will be in addition to ICD-9 codes currently maintained for an undetermined interim period
- Developing translation mapping crosswalks for specific processing needs based on the CMS issued General Equivalency Mapping that may be used to support dual processing of transactions with ICD-9 and ICD-10 codes and version-to-version translation
- Supporting the ability to process both the old and new code sets simultaneously to allow for reporting, and analysis of dates of services that cross the compliance date for a run-off transition period and until all legacy validation, adjudication, and reimbursement applications are converted to ICD-10
- Utilize ICD codes for use in HL7 Continuity of Care Record and SNOMED used in NHIN

Note: The FAA will not pay for any information received or costs incurred in preparing the response to the market survey. Therefore any cost associated with the market survey submission is solely at the interested vendor's expense.